

FILED
May 01, 2003 8:00 am
Secretary of State

3/1

03-13-2003 90082 028 ****70.00

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N02000001273

1. Entity Name

FIRST HATIAN FREE METHODIST CHURCH OF ORLANDO, I
NC.



Principal Place of Business

7201 WOODRIDGE PARK DR. #10-207
ORLANDO FL 32818

Mailing Address

7201 WOODRIDGE PARK DR. #10-207
ORLANDO FL 32818

2. Principal Place of Business

400 N. PINE HILLS Rd
Suite, Apt. #, etc.
D

3. Mailing Address

7201 WOODRIDGE PARK DR
Suite, Apt. #, etc.
10-207

City & State

ORLANDO FLORIDA
Zip Country
32811 USA

City & State

ORLANDO FL
Zip Country
32818 USA

4. FEI Number

59-372 4024

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ST. PIERRE, ANTHONY
7201 WOODRIDGE PARK DR, #10-207
ORLANDO FL 32818

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
ST PIERRE, ANTHONY
7201 WOODRIDGE PARK DR, #10-207
ORLANDO FL 32818 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Presiding
MONIQUE MICHEL
5584 ARNOLD PALMER DR #116
ORLANDO, FL 32811 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Dionisis Louis
5405 PAIN VIEJA # 208
ORLANDO, FL 32839 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Youth Pastor
JOSEPH MOREAU
1434 BALBOA AVE
ORLANDO FL 32818 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Music Director
ISRAEL PAUL
1430 Holden AV #260
ORLANDO FL 32822 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANTHONY SAINT PIERRE

REQUIRED

ANTHONY SAINT PIERRE 03/10/03 407-623-4756

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)